

By Mr. DOMENICI:

S. 1727. A bill to authorize for the expansion annex of the historic Palace of the Governors, a public history museum located, and relating to the history of Hispanic and Native American culture, in the Southwest and for other purposes; to the Committee on Energy and Natural Resources.

By Mr. VOINOVICH (for himself and Mr. DEWINE):

S. 1728. A bill to amend title XIX of the Social Security Act to remove the limit on amount of medicaid disproportionate share hospital payment for hospitals in Ohio; to the Committee on Finance.

By Mr. CAMPBELL (for himself and Mr. ALLARD):

S. 1729. A bill to amend the National Trails System Act to clarify Federal authority relating to land acquisition from willing sellers for the majority of the trails, and for other purposes; to the Committee on Energy and Natural Resources.

By Mr. CHAFEE:

S. 1730. An original bill to amend the Federal Water Pollution Control Act to provide that certain environmental reports shall continue to be required to be submitted; from the Committee on Environment and Public Works; placed on the calendar.

S. 1731. An original bill to amend the Clean Air Act to provide that certain environmental reports shall continue to be required to be submitted; from the Committee on Environment and Public Works; placed on the calendar.

By Mr. BREAUX (for himself, Mr. JEFFORDS, Mr. GRASSLEY, Mr. KERREY, and Mr. HATCH):

S. 1732. A bill to amend the Internal Revenue Code of 1986 to prohibit certain allocations of S corporation stock held by an employee stock ownership plan; to the Committee on Finance.

By Mr. FITZGERALD (for himself, Mr. LEAHY, Mr. LUGAR, Mr. HARKIN, and Mr. CRAIG):

S. 1733. A bill to amend the Food Stamp Act of 1977 to provide for a national standard of interoperability and portability applicable to electronic food stamp benefit transactions; to the Committee on Agriculture, Nutrition, and Forestry.

By Mr. DURBIN (for himself and Mr. FITZGERALD):

S. 1734. A bill to authorize the Secretary of the Interior to contribute funds for the establishment of an interpretative center on the life and contributions of President Abraham Lincoln; to the Committee on Energy and Natural Resources.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. LOTT (for himself and Mr. DASCHLE):

S. Res. 203. A resolution to authorize document production, testimony, and representation of Senate employees, in a matter before the Grand Jury in the Western District of Pennsylvania; considered and agreed to.

By Mr. SMITH of New Hampshire (for himself, Mr. BROWNBACK, and Mr. HELMS):

S. Con. Res. 59. A concurrent resolution urging the President to negotiate a new base rights agreement with the Government of Panama in order for United States Armed Forces to be stationed in Panama after December 31, 1999; to the Committee on Foreign Relations.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. JEFFORDS:

S. 1725. A bill to amend title XVIII of the Social Security Act to modernize Medicare supplemental policies so that outpatient prescription drugs are affordable and accessible for medicare beneficiaries; to the Committee on Finance.

THE DRUGGAP INSURANCE FOR SENIORS ACT OF 1999

Mr. JEFFORDS. Mr. President, I come to the floor today to introduce the DrugGap Insurance for Seniors Act of 1999, which will provide much-needed insurance coverage for medicines for low-income seniors, and will allow all other seniors, for the first time, to purchase an affordable, drug-only insurance policy to protect them against the runaway cost of drugs.

Mr. President, we are all aware that prescription drug costs continue to grow at an alarming rate. Seniors are being forced to spend greater and greater portions of their fixed incomes on prescription drugs that they need to live. Research and development of prescription drugs have come a long way since Medicare was originally enacted in 1965. Today, drugs are just as important, and in many cases more important, than hospital visits. It does not make sense for Medicare to reimburse hospitals for surgery, but not provide coverage for the drugs that might prevent surgery. That is why I am committed to modernizing the Medicare program so that it does not go bankrupt in the next 10 to 15 years. In addition, we must ensure that any Medicare reform proposal we consider includes a prescription drug benefit that helps all seniors.

This is a basic coverage problem that we must address as we modernize the Medicare program, and it is one of my top priorities. Ideally, it should be part of broad Medicare reform. Even if we are not able to achieve broad reform in the Medicare program this year, we must at least do something to address this basic need for seniors.

Today, I am introducing a bill that will target the most needy seniors. Currently, Medicare beneficiaries can purchase private insurance plans, called Medigap plans, to pay certain health care expenses that are not covered by Medicare. The law allows Medigap insurers to offer ten standardized plans to beneficiaries. However, only the three most expensive Medigap plans cover prescription drugs.

My plan calls for three new Medigap insurance plans to be developed that will cover only prescription drugs. The federal government will use a small portion of the budget surplus to purchase these new "DrugGap" policies for low-income Medicare beneficiaries who do not already have prescription drug coverage under Medicaid or through an employer sponsored plan. This bill provides all seniors the option of purchasing affordable, comprehensive coverage for prescription drugs even if

they do not qualify for the federal government purchase plan. The bill also includes reforms to the Medigap system to give seniors more choice, and to keep Medigap premiums affordable.

Mr. President, this bill offers several significant advantages to Medicare beneficiaries who need coverage for prescription drugs. First, nothing will change for those Medicare beneficiaries who like their current Medigap plans. This bill will offer more choices for Medicare beneficiaries, but will not make seniors change coverage that they like.

Second, this plan does not mandate prescription drug benefits on the current standardized plans, which some critics have argued will raise premiums. Indeed, one of the goals of this legislation is to make Medigap more affordable, and to seek solutions to the problem of the spiraling cost of Medigap premiums. This bill offers a way to accomplish this goal.

This bill also gives DrugGap policy holders access to the deep discounts on drugs that HMOs get, even if the beneficiary has not met the policy's deductible, and makes it clear that insurance companies can issue drug discount cards to Medigap policy holders even if the policy doesn't cover prescription drugs.

Finally, this bill will provide federal grants to the states for counseling for seniors regarding this new benefit.

Mr. President, this bill is not a substitute for the much-needed Medicare reform and Medicare drug benefit, but it is a positive step that we can take right now to protect Medicare beneficiaries until Medicare reform can be achieved, and a broad drug benefit is implemented. I hope my colleagues will support this moderate approach to helping Medicare beneficiaries deal with the runaway costs of prescription drugs.

Mr. President, I ask unanimous consent that the text of the bill and a brief summary of the bill be printed in the RECORD.

There being no objection, the items were ordered to be printed in the RECORD, as follows:

S. 1725

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "DrugGap Insurance for Seniors Act of 1999".

(b) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

- Sec. 1. Short title; table of contents.
- Sec. 2. Findings and purposes.
- Sec. 3. Modernization of medicare supplemental benefit packages.
- Sec. 4. Assistance to qualified low-income medicare beneficiaries.
- Sec. 5. Grandfathering of current Medigap enrollees.
- Sec. 6. Health insurance information, counseling, and assistance grants.
- Sec. 7. NAIC study and report.

SEC. 2. FINDINGS AND PURPOSES.

(a) FINDINGS.—Congress finds the following: